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CONFIRMATION NO. 2425

<b>SERIAL NUMBER</b> 09/767,442	<b>FILING OR 371(c) DATE</b> 01/23/2001 <b>RULE</b>	<b>CLASS</b> 248	<b>GROUP ART UNIT</b> 3632	<b>ATTORNEY DOCKET NO.</b> 960377.CII
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**APPLICANTS**  
 Lester A. LaMotte, Burnsville, MN;

**\*\* CONTINUING DATA \*\*\*\*\***  
 This application is a CIP of 09/480,108 01/10/2000 ABN which is a CIP of 08/878,745 06/19/1997 PAT 6,012,688 which is a CIP of 08/738,876 10/28/1996 PAT 5,839,705

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***  
 \*\* 03/06/2001

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	<b>STATE OR COUNTRY</b> MN	<b>SHEETS DRAWING</b> 40	<b>TOTAL CLAIMS</b> 28	<b>INDEPENDENT CLAIMS</b> 15
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**ADDRESS**  
23595

**TITLE**  
Collapsible display system

<b>FILING FEE RECEIVED</b> 467	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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